

(2) Covered activities

An activity referred to in paragraph (1) is any program, project, or other activity to assist in the treatment of juvenile sex offenders.

(b) Juvenile sex offender defined

For purposes of this section, the term “juvenile sex offender” is a sex offender who had not attained the age of 18 years at the time of his or her offense.

(c) Authorization of appropriations

There are authorized to be appropriated \$10,000,000 for each of fiscal years 2007 through 2009 to carry out this subchapter.

(Pub. L. 90-351, title I, §3012, as added Pub. L. 109-248, title VI, §623, July 27, 2006, 120 Stat. 635.)

Editorial Notes

CODIFICATION

Section was formerly classified to section 3797ee-1 of Title 42, The Public Health and Welfare, prior to editorial reclassification and renumbering as this section.

SUBCHAPTER XXXVIII—COMPREHENSIVE
OPIOID ABUSE GRANT PROGRAM

§ 10701. Description**(a) Grants authorized**

From amounts made available to carry out this subchapter, the Attorney General may make grants to States, units of local government, and Indian tribes, for use by the State, unit of local government, or Indian tribe to provide services primarily relating to opioid abuse, including for any one or more of the following:

(1) Developing, implementing, or expanding a treatment alternative to incarceration program, which may include—

(A) prebooking or postbooking components, which may include the activities described in subchapter XXIX or XXXIII of this chapter;

(B) training for criminal justice agency personnel on substance use disorders and co-occurring mental illness and substance use disorders;

(C) a mental health court, including the activities described in subchapter XXI of this chapter;

(D) a drug court, including the activities described in subchapter XXX of this chapter;

(E) a veterans treatment court program, including the activities described in subsection (i) of section 10651 of this title;

(F) a focus on parents whose incarceration could result in their children entering the child welfare system; and

(G) a community-based substance use diversion program sponsored by a law enforcement agency.

(2) In the case of a State, facilitating or enhancing planning and collaboration between State criminal justice agencies and State substance abuse agencies in order to more efficiently and effectively carry out activities or services described in any paragraph of this subsection that address problems related to opioid abuse.

(3) Providing training and resources for first responders on carrying and administering an opioid overdose reversal drug or device approved or cleared by the Food and Drug Administration, and purchasing such a drug or device for first responders who have received such training to so carry and administer.

(4) Locating or investigating illicit activities related to the unlawful distribution of opioids.

(5) Developing, implementing, or expanding a medication-assisted treatment program used or operated by a criminal justice agency, which may include training criminal justice agency personnel on medication-assisted treatment, and carrying out the activities described in subchapter XVIII of this chapter.

(6) In the case of a State, developing, implementing, or expanding a prescription drug monitoring program to collect and analyze data related to the prescribing of schedules II, III, and IV controlled substances through a centralized database administered by an authorized State agency, which includes tracking the dispensation of such substances, and providing for interoperability and data sharing with each other such program in each other State, and with any interstate entity that shares information between such programs.

(7) Developing, implementing, or expanding a program to prevent and address opioid abuse by juveniles.

(8) Developing, implementing, or expanding a program (which may include demonstration projects) to utilize technology that provides a secure container for prescription drugs that would prevent or deter individuals, particularly adolescents, from gaining access to opioid medications that are lawfully prescribed for other individuals.

(9) Developing, implementing, or expanding a prescription drug take-back program.

(10) Developing, implementing, or expanding an integrated and comprehensive opioid abuse response program.

(b) Contracts and subawards

A State, unit of local government, or Indian tribe may, in using a grant under this subchapter for purposes authorized by subsection (a), use all or a portion of that grant to contract with, or make one or more subawards to, one or more—

(1) local or regional organizations that are private and nonprofit, including faith-based organizations;

(2) units of local government; or

(3) tribal organizations.

(c) Program assessment component; waiver**(1) Program assessment component**

Each program funded under this subchapter shall contain a program assessment component, developed pursuant to guidelines established by the Attorney General, in coordination with the National Institute of Justice.

(2) Waiver

The Attorney General may waive the requirement of paragraph (1) with respect to a program if, in the opinion of the Attorney

General, the program is not of sufficient size to justify a full program assessment.

(d) Administrative costs

Not more than 10 percent of a grant made under this subchapter may be used for costs incurred to administer such grant.

(e) Period

The period of a grant made under this subchapter may not be longer than 4 years, except that renewals and extensions beyond that period may be granted at the discretion of the Attorney General.

(Pub. L. 90-351, title I, §3021, as added Pub. L. 114-198, title II, §201(a)(1), July 22, 2016, 130 Stat. 711.)

Editorial Notes

CODIFICATION

Section was formerly classified to section 3797ff of Title 42, The Public Health and Welfare, prior to editorial reclassification and renumbering as this section.

§ 10702. Applications

To request a grant under this subchapter, the chief executive officer of a State, unit of local government, or Indian tribe shall submit an application to the Attorney General at such time and in such form as the Attorney General may require. Such application shall include the following:

(1) A certification that Federal funds made available under this subchapter will not be used to supplant State, local, or tribal funds, but will be used to increase the amounts of such funds that would, in the absence of Federal funds, be made available for the activities described in section 10701(a) of this title.

(2) An assurance that, for each fiscal year covered by an application, the applicant shall maintain and report such data, records, and information (programmatic and financial) as the Attorney General may reasonably require.

(3) A certification, made in a form acceptable to the Attorney General and executed by the chief executive officer of the applicant (or by another officer of the applicant, if qualified under regulations promulgated by the Attorney General), that—

(A) the activities or services to be funded by the grant meet all the requirements of this subchapter;

(B) all the information contained in the application is correct;

(C) there has been appropriate coordination with affected agencies; and

(D) the applicant will comply with all provisions of this subchapter and all other applicable Federal laws.

(4) An assurance that the applicant will work with the Drug Enforcement Administration to develop an integrated and comprehensive strategy to address opioid abuse.

(Pub. L. 90-351, title I, §3022, as added Pub. L. 114-198, title II, §201(a)(1), July 22, 2016, 130 Stat. 712.)

Editorial Notes

CODIFICATION

Section was formerly classified to section 3797ff-1 of Title 42, The Public Health and Welfare, prior to editorial reclassification and renumbering as this section.

§ 10703. Review of applications

The Attorney General shall not finally disapprove any application (or any amendment to that application) submitted under this subchapter without first affording the applicant reasonable notice of any deficiencies in the application and an opportunity for correction of any such deficiencies and reconsideration.

(Pub. L. 90-351, title I, §3023, as added Pub. L. 114-198, title II, §201(a)(1), July 22, 2016, 130 Stat. 713.)

Editorial Notes

CODIFICATION

Section was formerly classified to section 3797ff-2 of Title 42, The Public Health and Welfare, prior to editorial reclassification and renumbering as this section.

§ 10704. Equitable distribution of funds

In awarding grants under this subchapter, the Attorney General shall distribute funds in a manner that—

(1) equitably addresses the needs of underserved populations, including rural and tribal communities; and

(2) focuses on communities that have been disproportionately impacted by opioid abuse as evidenced in part by—

(A) high rates of primary treatment admissions for heroin and other opioids;

(B) high rates of drug poisoning deaths from heroin and other opioids; and

(C) a lack of accessibility to treatment providers and facilities and to emergency medical services.

(Pub. L. 90-351, title I, §3024, as added Pub. L. 114-198, title II, §201(a)(1), July 22, 2016, 130 Stat. 713.)

Editorial Notes

CODIFICATION

Section was formerly classified to section 3797ff-3 of Title 42, The Public Health and Welfare, prior to editorial reclassification and renumbering as this section.

§ 10705. Definitions

In this subchapter:

(1) The term “first responder” includes a firefighter, law enforcement officer, paramedic, emergency medical technician, or other individual (including an employee of a legally organized and recognized volunteer organization, whether compensated or not), who, in the course of his or her professional duties, responds to fire, medical, hazardous material, or other similar emergencies.

(2) The term “medication-assisted treatment” means the use of medications approved by the Food and Drug Administration for the treatment of opioid abuse.

(3) The term “opioid” means any drug, including heroin, having an addiction-forming or